Vanderburgh County Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>11/28/2012</u>	Address:	2100 Maxwell Aye
Case #:	12 <u>-25839</u>		<u>Evansville, IN</u>
County:	Vanderburgh		<u>47714</u>
Type of L	aboratory Scizure (check one)	Scizure Location (check all that apply)
Chemic	ional Lab cal/Glassware/Equipment (only) site (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☑ Open – No Structure ☐ Other:
(check all t	i nd: Location (bedroom, kitchen, open : hat apply) n/Ammonia Reaction(s);	air, etc)	
Red Ph	iosphorous/Iodine Reaction(s):	_	
⊠ Flamm	able Solvents: Jar on person		
☐ Water i	Reactive Metal (Lithium):		
☐ Hydroc	chloric Acid Gas Generator(s):	_	
Anhydi	rous Ammonia:		
Corrosi	ive Acid: <u>Bottle on pers</u> on		
Corrosi	ive Base:		
Other (item and location):		
☐ Yes _ ☐ No ☐ Childre Living con Estimated	ter age 18 discovered (check approprise (number present) en not present but evidence they residentions of home: length of time manufacturing had been fulformation:	e or visit often	
This repor	rt has been faxed to the following a	gencies that serve the	location;
Tlealth Dep	tment: partment: nt of Child Services:	Fax: Fax: Fax:	
	information regarding this methamp ng Officer: <u>Det. Heath Stewart</u> Ph		ontact

This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.